



IAP08Rec'd PCT 04 DEC 2008 Patent
Attorney Docket No. 1027651-000274

\$
a.c.

In re Patent Application of)	MAIL STOP AMENDMENT
Gunnar Dike)	
Application No.: 10/533,551)	Group Art Unit: 1791
Filing Date: May 3, 2005)	Examiner: JILL LYNNE HEITBRINK
Title: INJECTION MOULDING DEVICE AND)	Confirmation No.: 9359
A METHOD OF OPENING AND)	
CLOSING A PARTIBLE MOULD IN AN)	
INJECTION MOULDING DEVICE)	

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is enclosed.
- ☐ _____ Terminal Disclaimer(s) and the ☐ \$ 70 ☐ \$ 140 fee per Disclaimer due under 37 C.F.R. § 1.20(d) are enclosed.
- ☒ Also enclosed is/are: Two (2) Replacement Sheets of drawings
- ☐ Small entity status is hereby claimed.
- ☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$ 405 ☐ \$ 810 fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.
- ☐ Applicant(s) previously submitted _____ on _____ for which continued examination is requested.
- ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

- ☐ No additional claim fee is required.
- ☒ An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims	26	25	1	x \$ 52 (1202)	\$ 0
Independent Claims	3	3	0	x \$ 220 (1201)	0
<input type="checkbox"/> If Amendment adds multiple dependent claims, add \$ 390 (1203)					\$ 0
Total Claim Amendment Fee					\$ 0
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					0
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 52

- ☐ Charge _____ to Deposit Account No. 02-4800 for the fee due.
- ☐ A check in the amount of _____ is enclosed for the fee due.
- ☒ Charge \$ 52 to credit card for the fee due. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date December 4, 2008

By:


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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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For: INJECTION MOULDING DEVICE)	Confirmation No.: 9359
AND A METHOD OF OPENING)	
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MOULD IN AN INJECTION)	
MOULDING DEVICE)	

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated October 2, 2008, please amend the
above-identified patent application as follows: